P15000014947

(Re	questor's Name)	
(Ad	dress)	
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PICK-UP	WAIT	MAIL
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SECRETARY OF STATE DIVISION OF CORPORATIONS
2015 FEB 25 AM IC: 07

DEPARTMENT OF STATE

15 FEB 25 PH 4: 20

And Concellar 10 2/20/15 CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195

REFERENCE :

502497

AUTHORIZATION

COST LIMIT

ORDER DATE: February 13, 2015

ORDER TIME: 1:31 PM

ORDER NO. : 502497-020

CUSTOMER NO:

7978488

DOMESTIC AMENDMENT FILING

NAME: UKM INTERNATIONAL SALES, INC.

EFFECTIVE DATE:

XX ARTICLES OF AMENDMENT

RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

___ CERTIFIED COPY

_ PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Courtney Williams -- EXT# 62935

EXAMINER'S INITIALS:

COVER LETTER

TO: Amendment Section Division of Corporations		
UKM INTERNATIONAL SA		
	Division of Corporations BIECT: UKM INTERNATIONAL SALES, INC. Name of Corporation CUMENT NUMBER: P15000014947 enclosed Articles of Correction and fee are submitted for filing. Isser return all correspondence concerning this matter to the following: URTNEY WILLIAMS Name of Contact Person RPORATION SERVICE COMPANY From Company 1 HAYS STREET Address LAHASSEE, FL 92301 Crit/State and Zip Code 1-mail address: the he used for fiture annual report neutrication) further information concerning this matter, please call: rtney Williams Rame of Contact Person at (800 927-9801 x 62935) Area Code & Daytone Lelephone Number losed is a check for the following amount: 35.00 Filing Fee \$43.75 Filing Fee & Certificate of Status \$\square \square \squar	
	_	
Please return all correspondence conc	erning this matter to the following:	
COURTNEY WILLIAMS		
Name of Contact Perso	n	
CORPORATION SERVICE COMPANY		
Firm:Company		
1201 HAYS STREET		
Address		
TALLAHASSEE, FL 32301		
City/State and Zip Co	xic .	
_		
E-mail address' (to be used for future an	nual report northeatton)	
For further information concerning thi	s matter, please call:	
Courtney Williams	800 927-9801 x 62935	
Name of Contact Person	Area Code & Daytime Telephone Number	
Enclosed is a check for the following a	amount:	
□ \$35.00 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	
□ \$43.75 Filing Fee & Certified Copy	\$52.50 Filing Fee, Certificate of Status & Certified Copy	
Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Amendment Section Division of Corporations	

ARTICLES OF CORRECTION

For

Name of Corporation as currently filed with the Florida Dept. of State		
P15000014947		
Document Number (11 known)		
Pursuant to the provisions of Section 607.0124 or 617.0124, Florida Statutes, this corporation these Articles of Correction within 30 days of the file date of the document being corrected.	files	
These articles of correction correct Articles of Incorporation (December 1 on Rama Carrent)		
(Document Type Being Corrected) filed with the Department of State on (File Date of Document)		
Specify the inaccuracy, incorrect statement, or defect: Article VI		
The name and address of the incorporator is:		_
Krista P. Harper		_
87 North Broad Street		_
Little Falls 2 2nd Floor		_
Doylestown, PA 18901		
Correct the inaccuracy, incorrect statement, or defect: Article VI	2815 FE	NOTOR
The name and address of the incorporator is:	325	9
Krista P. Harper	>>	8 6 820
87 North Broad Street	3	OR A
Doylestown, PA 18901	07	Š
		 -
(Signature of a director, president or other officer - if directors orbificers have not been selected by an incorporator - if in the hands of the receiver, trustee, or other court appointed fiduciary, by that fiduciary.)		_
KRISTA P. HATCHER PRE-DENT (Typed or printed name of person signing) (Typed or printed name of person signing) (Title of person signing)		-

Filing Fee: \$35.00